10/538933 JC09 Rec'd PCT/PTO 13 JUN 2005

APPLICATION DATA SHEET

Application Information

Application Type:: National Phase

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Number of CD disks::

Number of copies of CDs::

Sequence submission?::

Computer Readable Form (CRF)::

Number of copies of CRF::

Title:: SILYL ETHERS

Attorney Docket Number:: 26782U

Request for Early Publication?:: No Request for Non-Publication?:: No

Suggest Drawing Figure::

Total Drawing Sheets:: 0

Small Entity?:: No

Latin name::

Variety denomination name::

Petition included?:: No

Petition Type::

Licensed U.S. Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?::

Applicant Information

Applicant Authority type:: Inventor

Primary Citizenship Country:: NL

Status:: Full Capacity

Given Name:: Jan

Middle Name::

Family Name:: KOEK

Name Suffix:::

City of Residence:: BK Sauwerd

State or Province of Residence::

Country of Residence:: NL

Street of Mailing address:: Schoolstraat 16,

City of mailing address:: BK Sauwerd

State/Province of mailing address::

Country of mailing address:: NL

Postal Code of mailing address:: NL-9771

Applicant Information

Applicant Authority type:: Inventor

Primary Citizenship Country:: DE

Status:: Full Capacity

Given Name:: Bernhard

Middle Name::

Family Name:: KOHL

Name Suffix:::

City of Residence:: Konstanz

State or Province of Residence::

Country of Residence:: DE

Street of Mailing address:: Zum Brühl 9,

City of mailing address:: Konstanz

State/Province of mailing address::

Country of mailing address:: DE

Postal Code of mailing address:: 78465

Applicant Information

Applicant Authority type:: Inventor

Primary Citizenship Country:: DE

Status:: Full Capacity

Given Name:: Jörg

Middle Name::

Family Name:: SENN-BILFINGER

Name Suffix:::

City of Residence:: Konstanz

State or Province of Residence::

Country of Residence:: DE

Street of Mailing address:: Säntisstrasse 7,

City of mailing address:: Konstanz

State/Province of mailing address::

Country of mailing address:: DE

Postal Code of mailing address:: 78464

Applicant Information

Applicant Authority type:: Inventor

Primary Citizenship Country:: NL

Status:: Full Capacity

Given Name:: Ton

Middle Name::

Family Name:: VRIES

Name Suffix:::

Phone number::

City of Residence:: JM Groningen

State or Province of Residence::

Country of Residence:: NL

Street of Mailing address:: Troelstralaan 56,

City of mailing address:: JM Groningen

State/Province of mailing address::

Country of mailing address:: NL

Postal Code of mailing address:: NL-9722

Correspondence Information

Correspondence Customer Number:: 034375

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City of mailing address:: Washington

State/Province of mailing address:: D.C.
Country of mailing address:: U.S.A.

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Fax number:: (202) 775-8396

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Representative Information

F	Representative Customer Number::	034375
1	Representative Customer Number::	034375

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
		,	

Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::
EP	02028672.0	20 December 2002 (20.12.2002)	Yes

Assignee Information

Assignee name::

Altana Pharma AG

Street of mailing address::

Byk-Gulden-Str. 2

City of mailing address::

Konstanz

State/Province of mailing address::

Country of mailing address::

DE

Postal Code of mailing address::

78467